



IAP04Rec'd PCT 07 NOV 2008

Customized PTO/SB/21 (09-08)

|  |                |                  |
|--|----------------|------------------|
| <b>TRANSMITTAL FORM</b><br><br>(for all correspondence after initial filing) | Application #  | 10/581,355       |
|  | Confirmation # | 8470             |
|  | Filing Date    | January 18, 2007 |
|  | First Inventor | POWLESLAND       |
|  | Art Unit       | 2855             |
|  | Examiner       | Noori, Max H.    |
| Total number of pages in this submission =                                   | Docket #       | P08945US00/DEJ   |

| ENCLOSURES (check all that apply)   |   |
|---|---|
| <input checked="" type="checkbox"/> Fees calculated below<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> including Attachment(s)<br><input checked="" type="checkbox"/> <b>After Final</b> Amendment/Reply<br><input checked="" type="checkbox"/> including Attachments (Claims Listing & Remarks)<br><input checked="" type="checkbox"/> Extension of Time Petition (1 month)<br><input type="checkbox"/> | <input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/><br><input type="checkbox"/> |

|   |     |                     |               |            |            |
|---|-----|---------------------|---------------|------------|------------|
| <b>FEES CALCULATION:</b> For claims if required and/or other fees as shown below:     |     |                     |               |            |            |
|   | NOW | Previously Paid For | Present Extra | Rate       | \$         |
| <input checked="" type="checkbox"/> TOTAL CLAIMS                                      | 45  | - 41                | 4             | X \$ 52 =  | 208        |
| <input checked="" type="checkbox"/> INDEPENDENT CLAIMS                                | 4   | - 3                 | 1             | X \$ 220 = | 220        |
| TOTAL OF ABOVE CLAIMS FEES =  |     |                     |               |            | 428        |
| <input type="checkbox"/> Reduction by 1/2 for <b>small entity status</b> of applicant |     |                     |               |            |            |
| SUBTOTAL =  |     |                     |               |            | 428        |
| <input checked="" type="checkbox"/> Fee for extension of time (per attached Petition) |     |                     |               |            | 130        |
| <input type="checkbox"/> Other fee for  |     |                     |               |            |            |
| TOTAL OF ALL FEES =   |     |                     |               |            | <b>558</b> |

☒ Payment of \$ 558 is made by:☒ CREDIT CARD PAYMENT FORM - PTO-2038 submitted concurrently herewith.☐ ELECTRONIC FUNDS TRANSFER - submitted concurrently herewith.☒ The Director is authorized to charge any fee, additional fee or extension fee due in connection herewith to Deposit Account No. 12-0555:

(1) if no payment or an insufficient payment is enclosed and a fee is due in connection herewith; or

(2) if no petition for extension of time is enclosed but an EOT is required - and in this event, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely.

Date: November 7, 2008  
11/10/2008 LLANDGRA 00000030 1058135501 FC:1615  
02 FC:1614208.00 OP  
220.00 OP

Signed By Name: Douglas E. Jackson

Registration No.: 28,518

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